

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docking Number:

10779447

93214-038

## CLAIMS AS FILED - PART I

|   | (Column 1)      | (Column 2)   |
|---|-----------------|--------------|
| TOTAL CLAIMS  | 10              |              |
| FOR   | NUMBER FILED    | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 10 - minus 20 = | 0            |
| INDEPENDENT CLAIMS  | 2 - minus 3 =   | 0            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                 |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| 2/14/05   |                                  |                                    |               |
| Total   | 10                               | Minus                              | 20            |
| Independent   | 2                                | Minus                              | 3             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 385.00 |
| XS 9=     |        |
| X43=      |        |
| -145=     |        |
| TOTAL     | 385    |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 770.00 |
| XS18=     |        |
| X86=      |        |
| -290=     |        |
| TOTAL     |        |

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| XS 9=          |                |
| X43=           |                |
| +145=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

OR

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| XS18=          |                |
| X86=           |                |
| +290=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   |                                  |                                    |               |
| Total   |                                  | Minus                              |               |
| Independent   |                                  | Minus                              |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| XS 9=          |                |
| X43=           |                |
| +145=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

OR

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| XS18=          |                |
| X86=           |                |
| +290=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   |                                  |                                    |               |
| Total   |                                  | Minus                              |               |
| Independent   |                                  | Minus                              |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| XS 9=          |                |
| X43=           |                |
| +145=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

OR

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| XS18=          |                |
| X86=           |                |
| +290=          |                |
| TOTAL          |                |
| ADDITIONAL FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "20."

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

\* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.